©CJA 30 DEATH PENALTY P	ROCEEDII	NGS: APPC	<u>INTMEN</u>	T OF AND AUTHORI	<u>TY T</u> O P	AY COURT	APPOINTED COU	NSEL (Rev. 5	/99)		
1. CIR./DIST./ DIV. CODE	SENTED	D VOUCHER NUMBER									
3. MAG. DKT./DEF. NUMBER	AG. DKT./DEF. NUMBER 4. DIST. DKT		DKT./DE	KT./DEF. NUMBER		PEALS DKT	//DEF. NUMBER	6. OTH	6. OTHER DKT. NUMBER		
G Adu				PE PERSON REPRESENTED It Defendant G Appellant G Other eas Petitioner G Appellee ore than one offense, list (up to five) major offense			9. REPRESENTATION TYPE G D1 28 U.S.C. § 2254 Habeas G D2 Federal Capital Prosecution G D4 Other s charged, according to severity of offense.				
11 ATTODNEV'S NAME (Eiro	t Nama M I	Last Name	2	12. COURT ORDER:							
 ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS 				G O Appointing Counsel G F Subs For Federal Defender G P Subs For Panel G Y Standby Counsel G Y Standby Counsel							
				Prior Attorney's (A) Because the above-	nomod n		tad has tastified and	Appointm	· ·	isfied this Count that	
				or she (1) is financially to justice so require, the a qualifications by law, is (B) The attorney named	unable to	employ couns whose name a	el and (2) does not v appears in Item 11, v	vish to waive o who has been	ounsel, and determined t	because the interests to possess the speci	
Telephone Number:				Name of Co-Counsel		11 is appointe	dioserve G LEA	ID COUNSEL	0 co-c	OUNSEL	
13. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions)				or Lead Counsel: (C) If you represented the defendant or petitioner in any prior proceeding related to this matter, attach to your in							
(0.0)	,			claim a listing of those p G (D) Due to the expectime, for such a period w the attached order.	proceedin eted lengt	gs and describ h of this case,	be your role in each (each and the anticipated)	e.g., lead in co hardship on co	unsel or co-c ounsel in und	ounsel). lertaking representati	
				Signature of Presiding Judicial Officer or By Order of the Court							
				Date of Order Nunc Pro Tunc Date							
				(E) Repayment or partial repayment ordered from the person represented for this service at time of appointmen G YES G NO							
			CLA	IM FOR SERVIO	CES A	ND EXPE	NSES				
b G Trial f. G Petition for the h C C. G Sentencing U.S. Supreme Court i.				G Habeas Petition k G Petition for the G Evidentiary Hearing G Dispositive Motions G Appeal Writ of Certiorari			l. G Stay of Execution o G Other m. G Appeal of Denial of Stay i n. G Petition for Writ of Certiorari to the U.S. Supreme Court Regarding Denial of Stay				
	N CLAIMED				FOR COURT USE ONLY						
5. CATEGORIES (Attach itemization of services with dates)				HOURS CLAIMED		TOTAL AMOUNT	MATH/TECI ADJUSTED	ADJ	MATH/TECH. ADDITIO ADJUSTED REVIE		
a. In-Court Hearings (RATE PER HOUR = b. Interviews and Conferences with Client)				TO	IN COURT IN CO		
c. Witness Interviews d. Consultation with Investigators & Experts								Cat	egory a	Category a	
e. Obtaining & Reviewing the Court Record								0.V.m. 0	D. GOVIDE	OVER OF GOVE	
f. Obtaining & Reviewing Documents and Evidence g. Consulting with Expert Counsel									OUT OF COURT OUT OF TOTAL TO		
h. Legal Research and Writing								Cate	gories b-j	Categories b-j	
i. Travel j. Other (Specify on additional sheets)											
TOTALS: Categories b thru j (RA)							
CLAIM FOR TRAVEL AND EX 16. Travel Expenses (lodging, po				expenses with dates)							
17. Other Expenses (other than e											
GRAND TOTALS (CLA				7:							
18. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD TO:				OD OF SERVICE			ENT TERMINATION HAN CASE COMP		20. CAS	SE DISPOSITION	
21. CLAIM STATUS G	Final Payn	nent	G Inte	rim Payment Number	'		G Suppl	emental Paym	ent		
Have you previously applied to Other than from the Court, has representation? G YES I swear or affirm the truth of	ve you, or to G NO	o your know If yes, gi	rledge has ve details	anyone else, received pa on additional sheets.	G YE			you paid? Confirmation from any other		NO connection with this	
Signature of Attorney							Date	e			
		AF	PROV	ED FOR PAYME	NT —	COURT	USE ONLY				
22. IN COURT COMP.	7	24. TRAVEL EXPENS		25. OTHER EXPENSES		26. TO	26. TOTAL AMT. APPROVED				
27. SIGNATURE OF THE PRES	IDING JUI	DICIAL OF	FICER			DATE		27a. JU	27a. JUDGE CODE		